



# CRESCENT SCHOOL

130-132 Front St., Hempstead, NY 11550

## ADMISSION APPLICATION

School Year \_\_\_\_\_

Grade \_\_\_\_\_

### I. PERSONAL INFORMATION

Student Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth (m/d/y) \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_\_ Country of Birth \_\_\_\_\_

Father's Country of Origin \_\_\_\_\_ Mother's Country of Origin \_\_\_\_\_

Primary language spoken in the home: \_\_\_\_\_ English Proficient (y/n) \_\_\_\_\_

### ACADEMIC HISTORY

Please list all schools that have been attended by the above student, starting with the most recent school in the first line and working chronologically backward. If the student is entering school for the first time leave this section blank.

<i>School Name</i>	<i>Address</i>	<i>Dates Attended</i>	<i>Completed Grade</i>

Describe any special awards or recognition the student has received in a school or community setting.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe any special testing, tutoring or therapy that the student has taken or received in the last three years and the result.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. FAMILY INFORMATION**

Father's Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Mother's Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Legal Guardian's Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_  
*(If the child is not living with the parents)*

Home Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Father's Employer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Mother's Employer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

**\* In case of emergencies, who should be called?**

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

**III. MEDICAL HISTORY**

1. Does the student have any of the following medical or physical conditions? (Check all that apply.)

Wears Glasses \_\_\_\_\_  
Has asthma \_\_\_\_\_  
Requires Insulin \_\_\_\_\_

Hearing Impaired \_\_\_\_\_  
Physical Impairment \_\_\_\_\_  
Takes Medications \_\_\_\_\_

2. If your child takes medication regularly please explain the nature of the illness and the type of medication taken as well as its daily frequency.

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3. Please record any major operations, surgeries or injuries that the student has had and the year in which they occurred.

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4. Are there any activities (i.e. physical education, etc...) that your child should not participate in? Please explain. (\* Attach any pertinent physician's notes.)

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5. Child's doctor's name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

### ADMISSION PROCEDURE

- Please complete this application and submit it in the school office, together with a copy of the applicant's birth certificate or passport and a recent photo with a check or money order for \$150 as a nonrefundable and nondeductible registration fee.
- Proper documentation regarding all types of state required immunization must be provided to the school before the student can attend classes. Students transferring to Crescent School must also have updated immunization records submitted to the school administration. No student will be admitted without proper immunization documentation.
- All applicants for grades one through eight must take a mandatory entrance test for placement. Pre-K applicants must be at least four years old by September 1 and trained for restroom usage. Kindergarten applicants must be at least five years old by December 31 to be eligible for admission. All applicants will be interviewed by the principal along with their parents.
- Decisions regarding acceptance to Crescent School are made by the school administration after the entrance tests have been evaluated. Class sizes are small so seating is limited. Early filing of applications is recommended. Admission decisions are communicated to parents as promptly as possible. If space is not available for your child, you can elect to place your child on our waiting list.
- All tuition and fees due at the time of school commencement.

### TERMS AND CONDITIONS OF CRESCENT SCHOOL

This application is a request for admission and does not guarantee acceptance. It is understood that class sizes are limited and placement priority is given to those who are currently enrolled. For Pre-K students applications are accepted on a first come first served basis. In addition, priority is also extended to those students who already have a sibling enrolled in the school. Crescent School reserves the right to exclude any student permanently or temporarily at any time that the Administration deems such action appropriate, either in the interest of the student or for the good of the school.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*Crescent School admits students of any race, color, gender, national or ethnic origin to all the rights, programs, activities and privileges generally accorded or made available to students at the school. It does not discriminate on the basis of race, color or ethnic origin in the administration of its education, admission, scholarship, disciplinary or other policies.

**FOR OFFICE USE ONLY**

- Registration Fee received                       Immunization Records received
- \_\_ Check \_\_ Money Order \_\_ Cash                       Application Signed and Dated
- Student Identification received                       Transfer Records received
- Birth Certificate     Transcript
- Passport     Disciplinary Records if any
- Other \_\_\_\_\_

Placement Test Administered (Date \_\_\_\_/\_\_\_\_/\_\_\_\_ )

- Math Score \_\_\_\_\_
- English Score \_\_\_\_\_
- Social Stud. \_\_\_\_\_
- Other Scores \_\_\_\_\_

Date of Enrollment \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_                      Grade \_\_\_\_\_

Waiting List Number \_\_\_\_\_ for Grade \_\_\_\_\_

Application received by \_\_\_\_\_ Date \_\_\_\_\_

Interviewed by \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_